

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Law Office of Justine Cuccia
325 Broadway
New York, NY. 10007

COMPLETE THIS SECTION ON DELIVERY

A. Signature X <i>Justine Cuccia</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name) <i>Chen Sze Fung</i>	C. Date of Delivery <i>3/27</i>
D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:	
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

2. Article
(Trac) **7001 1940 0001 2179 8644**

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1035

**FILED
HARRISBURG, PA**

MAR 27 2003

*MARY E D'ANNEA, CLERK
PER
DEPUTY CLERK*

*CU -
100-1901-*

1M1551NS